

**MULTIPLE DEPENDENT
FEE CALCULATION
(FOR USE WITH FORM I)**

**IM
T
15)**

APPLICANT(S)

688343

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	1					
TOTAL DEP.	17					
TOTAL CLAIMS	18					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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